



TWEED RIVER HIGH SCHOOL

Out of Zone Enrolment Application

Year Seeking 7 8 9 10 11 12

(Please circle one)

Please complete all sections and return to Tweed River High School

Principal Ms Leisa Conroy 4 Heffron Street Tweed Heads South NSW 2486 ABN 57 259 148 522
T 07 55243007 F 07 55249501 E tweedriver-h.school@det.nsw.edu.au www.tweedriver-h.schools.nsw.edu.au

Date of Enquiry: _____ Student: _____

Male/Female Date of Birth: ____/____/____ Aboriginal/Torres Strait Islander: Y / N

Parent /Guardian: _____

Address: _____ Town/City _____ Post Code: _____

Phone No: _____ Mobile No: _____

Email address: _____

Seeking enrolment for year: 7 8 9 10 11 12

In Year: 2020 2021 2022 2023

Current School: _____

Address: _____

Phone No: _____ School Contact: _____ Position: _____

Your reasons for enrolment at Tweed River High School?

How do you think this school can meet the education needs of your child?

Why do you think this school can meet the social needs of your child?

Has the student been suspended or expelled from any previous school? YES/NO
If so, for what reason:

Please outline positive contributions of child/family to current school community? What can you offer to Tweed River High School?

Are there siblings at this school? (please provide names and details)

Current subjects studied:

Additional information you would like the school to take into consideration:

OFFICE USE ONLY: Accepted Yes No